



2004 FORM MO-PTC

AMENDED CLAIM **10**

MISSOURI DEPARTMENT OF REVENUE

PROPERTY TAX CREDIT CLAIM

VENDOR
CODE **11**

SOCIAL SECURITY NO. 12		SPOUSE'S SOCIAL SECURITY NO. 13	
LAST NAME 14		FIRST NAME 15	INITIAL 16 JR, SR 17
BIRTHDATE MM DD YY 191	TELEPHONE NUMBER 121		DECEASED 18 2004
SPOUSE'S LAST NAME 19		FIRST NAME 20	INITIAL 21 JR, SR 22
BIRTHDATE MM DD YY 192		DECEASED 23 2004	IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.) 24
PRESENT HOME ADDRESS 27		CITY, TOWN, OR POST OFFICE 28	STATE 29 ZIP CODE 30

QUALIFICATIONS	You must check a qualification to be eligible for a credit. Check only one. Required copies of letters, forms, etc., must be included with claim.			
	193 A. 65 years of age or older (Attach a copy of Form SSA-1099.)		195 C. 100% Disabled (Attach a copy of the letter from Social Security Administration or Form SSA-1099.)	
	194 B. 100% Disabled Veteran (Attach a copy of the letter from Department of Veterans Affairs.)		196 D. 60 years of age or older and received surviving spouse benefits (Attach a copy of Form SSA-1099.)	

FILING STATUS 197 Single 198 Married — Filing Combined 199 Married — Living Separate for Entire Year	If married filing combined, you must report both incomes.
Failure to provide proper supporting documentation (rent receipt(s), tax receipt(s), 1099(s), W-2(s), etc.) will result in denial or delay of your claim! Items listed below in red MUST be attached to claim if that line has an amount entered on it.	

HOUSEHOLD INCOME	1. Enter the amount of social security benefits received by you and/or your minor children before any deductions and/or the amount of social security equivalent railroad retirement benefits. Attach Form SSA-1099 and/or RRB-1099.	1	201	00
	2. Enter the total amount of wages, pensions, annuities, dividends, interest income, rental income, or other income. Attach Forms W-2(s), 1099(s), 1099-R(s), 1099-DIV, 1099-INT, 1099-MISC, etc.	2	202	00
	3. Enter the amount of railroad retirement benefits (not included in Line 1) before any deductions. Attach Form RRB/1099-R (Tier II).	3	203	00
	4. Enter the amount of veteran's payments or benefits before any deductions. Attach letter from Veterans Affairs.	4	204	00
	5. Enter the total amount received by you and/or your minor children from: public assistance, SSI, child support, Temporary Assistance payments (TA and/or TANF). Attach a copy of Form SSA-1099(s), a letter from the Social Security Administration and/or Social Services that includes the total amount of assistance received and Employment Security 1099, if applicable.	5	205	00
	6. TOTAL household income — Add Lines 1 through 5.	6	207	00
	7. Enter \$2,000 if you are married and filing a combined claim with your spouse. Otherwise, enter "0".	7	-	208 00
	8. Net household income — Subtract Line 7 from Line 6. If the total is over \$25,000, no credit is allowed — Do not file this claim. (Amount from Line 8 is used to figure your credit.)	8	209	00
REAL ESTATE TAX / RENT PAID	9. If you owned your home, enter the total amount of real estate tax that you paid for your home less special assessments. Attach a copy of PAID real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, attach Form 948, Assessor's Certification.	9	210	00
	10. If you rented your home, enter the amount from Form MO-CRP(s), Line 8 in box below. (If total yearly rent is more than Line 6, attach rent payment explanation.) Attach rent receipt(s) for the whole year or each month or a statement from your landlord, along with Form MO-CRP. Copies of cancelled checks (front and back) will be accepted if your landlord will not provide rent receipts, or statement. 10a. 211 00 x 20% = 10b 212 00	10b	212	00
	11. Total tax and/or rent — Add Lines 9 and 10b and enter the total or \$750, whichever is less. (Amount from Line 11 is used to figure your credit.)	11	213	00
CREDITS	12. You must use the chart in the instructions to see how much refund you are allowed. Apply amounts from Lines 8 and 11 to chart in the instructions to figure your Property Tax Credit. Line 12 should not exceed \$750. Enter credit here. TOTAL REFUND	12	214	00

SIGNATURE	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he/she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to \$500 shall be imposed on any individual who files a frivolous claim.		DOR ONLY <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> P <input type="checkbox"/> F <input type="checkbox"/>	
	I authorize the Director of Revenue or delegate to discuss my claim and attachments with the preparer or any member of the preparer's firm 120 YES <input type="checkbox"/> NO <input type="checkbox"/> PREPARER'S PHONE			
	SIGNATURE	DATE	PREPARER'S SIGNATURE	FEIN, SSN, OR PTIN 122
	SPOUSE'S SIGNATURE	DAYTIME TELEPHONE 121	PREPARER'S ADDRESS AND ZIP CODE	DATE

Mail claim and attachments to Missouri Department of Revenue, P.O. Box 2800, Jefferson City, MO 65105-2800.